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CONFIRMATION NO. 2900

<b>SERIAL NUMBER</b> 10/790,746	<b>FILING OR 371(c) DATE</b> 03/03/2004 <b>RULE</b>	<b>CLASS</b> 552	<b>GROUP ART UNIT</b> 1641	<b>ATTORNEY DOCKET NO.</b> 0756-0124P
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\* 12/22/2000**

This application is a CIP of 09/720,338 ~~02/20/2001~~ PAT 6,787,660 \* which is a 371 of PCT/EP99/04418  
 06/25/1999  
 (\*)Data provided by applicant is not consistent with PTO records.

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

GERMANY 198 28 379.2 06/25/1998  
 GERMANY 198 40 435.2 09/04/1998

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 05/21/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 16	<b>TOTAL CLAIMS</b> 10	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**  
 2292

**TITLE**

Functional vitamin D derivatives and method of determining 25-hydroxy- and 1alpha, 25-dihydroxy vitamin D

<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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